

TITLE COMPANIES

COMPANY NAME: _____ NAIC Company Code: _____
 Contact: _____ Telephone: _____
 REQUIRED FILINGS IN THE STATE OF: _____ Filings Made During the Year 2005

(1) Check- List	(2) Line #	(3) REQUIRED FILING FOR THE ABOVE STATE	(4) NUMBER OF COPIES*			(5) DUE DATE	(6) FORM SOURCE**	(7) APPLICABLE NOTES
			Domestic		Foreign			
			State	NAIC	State			
		I. NAIC FINANCIAL STATEMENTS						
	1	Annual Statement (8 1/2" x 14")	3	1	1	3/1	NAIC	H(a), I, J, K (a)
	1.1	Printed Investment Schedule detail (Pages E01-E26)	3	1	xxx	3/1	NAIC	
	2	Quarterly Financial Statement (8 1/2" x 14")	2	1	1	5/15, 8/15, 11/15	NAIC	H(a), I, J, K(a)
		II. NAIC SUPPLEMENTS						
	11	Investment Risk Interrogatories	1	1	1	4/1	NAIC	K (a)
	12	Management Discussion & Analysis	2	1	1	4/1	Company	K (a)
	13	Schedule SIS	1	N/A	N/A	3/1	NAIC	
	14	Statement of Actuarial Opinion	3	1	1	3/1	Company	K (a)
	15	Supplemental Compensation Exhibit	1	N/A	N/A	3/1	NAIC	K (a)
	16	Supplemental Schedule of Business Written By Agency	1	1	1	4/1	NAIC	K (a)
		III. ELECTRONIC FILING REQUIREMENTS						
	30	Annual Statement Electronic Filing	xxx	1	xxx	3/1	NAIC	
	31	March .PDF Filing	xxx	1	xxx	3/1	NAIC	
	34	Supplemental Electronic Filing	xxx	1	xxx	4/1	NAIC	
	35	Supplemental .PDF Filing	xxx	1	xxx	4/1	NAIC	
	37	Quarterly Electronic Filing	xxx	1	xxx	5/15, 8/15, 11/15	NAIC	
	38	Quarterly .PDF Filing	xxx	1	xxx	5/15, 8/15, 11/15	NAIC	
	33	June .PDF Filing	xxx	1	xxx	6/1	NAIC	
		IV. AUDITED FINANCIAL STATEMENTS						
	51	Accountants Letter of Qualifications	2	N/A	1	6/1	Company	K (a)
	52	Audited Financial Statements	2	1	1	6/1	Company	K (a)
	53	Audited Financial Statements Exemption Affidavit	xxx	N/A	N/A		Company	
	54	Independent CPA	xxx	N/A	N/A		Company	
	55	Notification of Adverse Financial Condition	xxx	N/A	N/A		Company	
	56	Report of Significant Deficiencies in Internal Controls		N/A	N/A	6/1	Company	N
	57	Request for Exemption to File	1	N/A	1	5/1	Company	J
		V. STATE REQUIRED FILINGS						
	101	Filings Checklist (with Column 1 completed)	xxx	1	xxx		State	
		Signed Jurat	xxx	xxx	1	3/1, 5/15, 8/15, 11/15	Company	K (b)
	102	State Filing Fees	1	0	1		State	
	103	Application for Renewal of CofA	1	0	1	3/1	State	
	104	Title Premium Reserve	1	xxx	1	3/1	State	K (a)
	105	Updated Biographical Affidavits	1	xxx	xxx	3/1	Company	
	106	EDP Listing – Form Enclosed	1	xxx	xxx	3/1	State	K (a), L, O
	107	Form B&C – Holding Company Registration Statement	1	xxx	xxx	4/15	Company	K(a), P
	108	Form B Inter-company Agreements Supplement	1	xxx	xxx	4/15	State	K, (a)
	109	Basket Clause Statement	1	xxx	xxx	3/1	State	K (a), Q
	110	Electronic Election Form	0	XXX	1	3/1	State	K (b)

*If XXX appears in this column, this state does not require this filing, if hard copy is filed with the state of domicile and the NAIC and if the data is filed electronically with the NAIC. If N/A appears in this column, the filing is required with the domiciliary state.

**If Form Source is NAIC, the form should be obtained from the appropriate vendor.